

Nebraska's Capital City

December 5, 2002

Mayor Wesely and City Council City of Lincoln City County Building Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Colorado Hospitality Services Inc., d.b.a. Best Western Airport Inn, 3200 N.W. 12th Street requesting a class C liquor license.

Colorado Hospitality Services has requested that Leo Scherer be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Leo Scherer was born in Lincoln, Nebraska. He attended the University of Nebraska graduating in 1956.

Leo Scherer employment history is as follows:

| 2001 - Present | G.M, Best Western Airport Inn | Lincoln, NE. |
|----------------|--|--------------|
| 2000 - 2001 | Marketing Director, Innovative Manufacturing | Lincoln, NE. |
| 1999 - 2000 | Marketing, Uniservice | Lincoln, NE |
| 1994 - 1999 | Marketing, National Warranty Insurance | Lincoln, NE. |
| 1986 - 1994 | Manager, Nebraska State Fair Park | Lincoln, NE. |

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

Thenk. Com





| Ι | Liquor License Investigation |
|---|---|
| I | Business (DBA) Best Western ARport INV |
| | Manager Owner Other |
| | Name: Leu Scherer |
| 1 | US Citizen ? Yes No |
| | Has applicant ever been cited for liquor law violations? No Yes Explain |
| | Does applicant have an interest in another liquor license? No Yes Explain |
| | Is spouse qualified to hold a license? Yes No N/A |
| | How is applicant if not an owner to be paid? Salary Hourly |
| | How many hours will applicant be at the establishment? 50+ |
| - | Any other employment ? No ,explain |
| | Any previous experience with a liquor license? Yes No |
| P | Any criminal convictions 2 No Yes Comments |
| | Is applicant a property owner in Lincoln? Yes No |
| | Is applicant involved in any civil litigation? No Yes Comments |
| | (APhoto (O Records Check (C) References |
| | Comments_ |
| | Interview Date 12 1 4 1 02 |

LEO SCHERER, JR. 620 West Broadview Drive Lincoln, Nebraska 68505 (402) 488-1847 CAREER OBJECTIVE A position that will utilize my experience in business, government and customer relations as well as offering professional challenges SUMMARY. Over twenty years of experience in management. Extensive experience in city, county and state government. Excellent abilities in organization, communication and motivation. EXPERIENCE 2001 to Airport Inn, Lincoln Nebraska present General Manager Manage all aspects of daily hotel operations including the supervision of sales. 2000 to Innovative Manufacturing, First Choice Roll-Offs; Lincoln, Nebraska 2001 Marketing Director Advertising, customer relations and sales. 1999 to Uniservice Linen Company; Lincoln, Nebraska 2000 Marketing Associate Handled sales, advertising and customer relations. 1994 to National Warranty Insurance Company; Lincoln, Nebraska 1999 Marketing Director Managed marketing, sales and customer relations. 1988 to Nebraska State Fair: Lincoln, Nebraska 1994 **Operations Assistant** Managed horse racing, marketing, sales and promotion. 1984 to Lincoln Best Western Airport Inn; Lincoln, Nebraska 1988 Manager/ Sales Director Managed all aspects of dally hotel operations. 1981 to Nebraska State Energy Office, Lincoln Nebraska 1984 **Deputy Director** Administrative management, information and organizational duties. **ACTIVITIES** Lincoln Electric System Board- Past Member Lincoln Sowers Club- Past Member Lincoln City Council- Past Member Lancaster County Board of Commissioners- Past Member Nebraska Governor's Office- Former Administrative Assistant

- Lincoln Mayor's Office- Former Administrative Assistant
- Lincoln Community Development Department- First and Former Director
- Nebraska County Officials Association- Past Member
- Lincoln Journal- Former Award-Winning Reporter in crime and government coverage.
- Capital Humane Society-Past Member
- Lincoln Junior Chamber of Commerce-Past Member
- Arnold's Tavern-Former Owner
- University of Nebraska Lincoln Football Team-Orange Bowl Player

EDUCATION

University of Nebraska, Lincoln, Nebraska Bachelor of Arts-Journalism

REFERENCES

Available upon request

STATE OF NEBRASKA

Act date: 12-2-02 P.H 12-16-02



Mike Johanns Governor November 22, 2002

Class C #57466

City Clerk of Lincoln City/County Building 555 S 10 Street Lincoln, NE 68508 A2-135820

139

NEBRASKA LIQUOR CONTROL COMMISSION
Forrest D. Chapman

Executive Director

301 Centennial Mall South, 5th Floor P.O. Box 95046 Lincoln, Nebraska 68509-5046

Phone (402) 471-2571 Fax (402) 471-2814 SER 800 833-7352 (TTV)

Best Western A, rport Inn 3200 NW 12th Street

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

 You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- Upon payment of the license fees;
- Physical possession of the license;
- Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Licensing Division

Enclosures Rhonda R. Flower Commissioner

Bob Logsdon Chairman

R.L. (Dick) Coyne Commissioner

NEBRASKA

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001 REV. 12/99

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046

http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application. Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in RECEIVED

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NEBRASKA LIQUOR CONTROL COMMISSION

the state of Nehraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH Class of License Registration License (Check applicable class) Corporate Fee Fees Surety Bond A Beer, On Sale Only - Inside Corporate Limits \$45.00 Collected at Local Level Beer, On Sale Only - Outside Corporate Limits exempt \$45.00 Collected at Local Level Beer, Off Sale Only - Indicate Inside or Outside Corporate Limits exempt \$45.00 Collected at Local Level Wine, Beer, On Sale Only - Inside Corporate Limits exempt \$45.00 Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits Collected at Local Level exempt \$45.00 Collected at Local Level D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits exempt \$45.00 D1 Spirits, Wine, Beer, Off Sale only - within \$150.00 exempt extraterritorial zoning jurisdiction \$45.00 C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits \$150.00 exempt \$45.00 Collected at Local Level M Bottle Club (Spirits, Wine, Beer, on Sale) exempt \$45.00 Collected at Local Level H Nonprofit Corporation exempt \$45,00 Collected at Local Level K Wine Only, Off Sale exempt \$45.00 Collected at Local Level O Boat exempt \$45.00 \$ 50.00 V Manufacturer of Beer, Wine & Distilled Spirits exempt \$45.00 Varies \$100 to \$1.000 X Wholesale Liquor \$10,(XX) min. \$45.00 \$500.00 W Wholesale Beer \$ 5,000 min. \$45.00 \$250.00 Farm Winery \$ 5,000 min. \$45.00 \$250.00 Craft Brewery (Brew Pub) \$ 1,000 min. \$45.00 \$250.00 TYPE OF APPLICATION \$ 1,000 min. CORPORATE SURETY BOND INFORMATION Bond Company - for Classes I, V W X Y only Type of application being applied for (place appropriate number in box) 3 1= Individual License requires Form I to be attached. 2= Partnership License requires Form 2 to be attached. Start Date Month/Day/Year Bond Number 3= Corporate License requires Form 3 and 4 and Manager Application be attached. SECTION A - LOCATION INFORMATION - Must be completed by all applicants Trade Name (name of business) Telephone Number at premise to be licensed 1) Street Address of Proposed licensed premise 2) Mailing Address for receipt of Liquor Control Commission mailings 3200 N.W. 12th St. 3200 N.W. 12th St. County Zip Code

City County Zip Code City County Zip Code

Lincoln, NE 68521 Lincoln, NE 68521

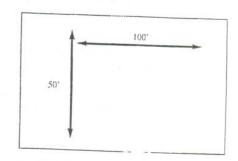
FORM 35-4010
Page 1

Rev. 7001

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

N Δ

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bildg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

See attached

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NEBRASKA LIQUOR CONTROL COMMISSION

| SECTION B OTHER INFORMA | TION | REQUI | RED |
|--|------|-------|--|
| I. READ CAREFULLY. Answer completely and accurately. I. I | Yes | | Explanation/Comments Gholamreza Rahmani-f Bruce Rahmani Criminal Impersonation No charges Pending. 1987 |

| | | | - 1 1 12 |
|---|---------|---------------|---|
| | Yes | No | Explanation/Comments |
| Are you buying the business and/or assets of a licensee? If yes, submit a opy of the sales agreement with a listing of assets being acquired including quor inventory (name brand and container size required). | 1 | | See attached List |
| Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, ttach copy. | / | | |
| Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender. | | / | |
| . Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain. | | V | |
| b. Will any of the furniture, fixtures and equipment to be used in this pusiness be owned by others? If yes, list such items and the owner. | V | # ** | see attached List |
| 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? | | √ | RECEIVED |
| 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177. | | V | NOV 20 2002 NEBRASKA LIQUOF CONTROL COMMISSI |
| Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties | | V | GON THOSE |
| 10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions. | 1 | eo So | Husker Bank Cherer |
| 11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held. | La | rnold | herer)s Tavorn - Hovelock Soldhusiness |
| 12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations. | | | ours per week |
| 13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products. | Fo lice | rmer conse | d establish ment d operated Arnolds Havelock for latyeass |
| 14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed). | / | | ached OWN |
| 14. When do you intend to open for business? | u | pn- | transfer of liquor |

| NAME ALA | FROM | ТО | RESIDENCE (CITY |
|--------------------------------------|-------------|---------|-----------------|
| Bruce Rahmani Gholamreza Rahmani-Aze | (YEAR) | (YEAR) | STATE) |
| 45001 E. Kentucky Circle | 1998 | prosent | |
| Blindale, Co 20246 | 4 | , | - E |
| 0 | | | 17 |
| 3333 E. Bayand Ste#519 | 1993 | 1998 | |
| Denver Co 80209 | | | a sa a |
| | | 6.10. | |
| | Section 188 | Ar | j (a. 9) |

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

| sign here sign here | Gbolanreza Rahma | mi-Azar | sign here ——————————————————————————————————— |
|--------------------------------|--|---------------------------------------|--|
| sign here | * | | sign here |
| sign | | d d | sign here |
| Subsc | ribed in my presence and sworn to | before me this | day of No Kember, 2002 |
| appl avail with perio | compliance with ADA, this ication for license form is lable in other formats for persons disabilities. A ten day advance od is requested in writing to | SEALS OF COLOR | O Jugle Dellis |
| prod | uce the alternate format. | · · · · · · · · · · · · · · · · · · · | Notary Public Signature |
| | | | |

| TEMPORA | ARY AGENCY AGREEMENT ID#_(| 4100 |
|---|--|---|
| TICMET INN | 2002, Seller and Buyer entered into a contract, which contract | et for sale of the business known as is contingent upon Buyer receiving |
| pproval for a liquor license to operate | the business. | is contingent upon Buyer receiving |
| . Seller and Buyer agree to allow Buye tot to exceed 120 days subsequent to Commission. | r to operate the business, subject to approval by the Lie Nov 17, 2003, the date of filing the | quor Control Commission, for a period ne application with the Liquor Control |
| . Seller will maintain a possessory int | terest in the property in the form of a lease, use permit | or license; |
| s specifically understood that Seller shargrees to indemnify and hold Seller har | of the Seller, but Buyer will be completely and totally with the operation of the business during the time who hall have no liability for the operation of the business rmless from any claims arising during this period of operation of the Seller and Seller will be responsible for all violations is canceled; | en Buyer is acting as Seller's agent; it during this period of time, and Buyer |
| . At time of closing, certain funds will | ll be held in escrow pending issuance of the license. | |
| S. Financial Institution: Name, Cornhus Ker Bank | The state of the s | escrow account is being held |
| Cical I | | |
| All profits derived from the operation | on of the business by the buyer, after payment of bills | and salaries, shall be paid to the same |
| agent to be neld than the issuan | ace of the license, it being specifically understood that to quor license has been issued to Buyer, but shall have the | the Divige shall esserve as a selfer f |
| B. This agreement constitutes the enti- binding upon the heirs, personal repres | ire and complete understanding of all parties with reg sentatives and successors of the parties. | gard to the agency relationship, and is |
| 9. It is hereby understood that in the evoid the date of the order. | vent the Commission denies this application, this Tem | |
| 7 20 | Signature of Seller destat ann der by | Lel Broks - Prze |
| a set | Signature of Seller Ourfat ann dry fur Signature of Seller | RECEIVED |
| | Signature of Buyer Brune Kahmani | |
| x 8 8 | Signature of Buyer | NOV 20 2002 |
| Dated this 12 th | day of November 2002 | NEBRASKA LIQUOR |
| STATE OF NEBRASKA) | N II A N N N N N N N N N N N N N N N N N N N | CONTROL COMMISSION |
| county of lane aster) ss | | · · |
| The above and foregoing Agency Agreements | ent was acknowledged before me this \(\) day of \(\) as Seller, |)\\2m\\2\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| The above and foregoing Agency Agreements | ent was acknowledged before me this \2 day of \\ as Buyer, | 10/2 mbo (, 2002 as Buyer. |
| | A SERIES | |
| Signature & Seal of Notary Public | -ANXIVAL | DARRELL K. STOCK My Comm. Exp. Dct. 19, 2006 |

Return to:

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Application for Corporate Manager

Must Be A Nebruska Resident

Please submit in Triplicate

Nebraska Liquor Control Commission, PO Box 95046

301 Cantannial Mali So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: http://www.nol.org/home/NLCC/

NOV 20 2002

NEBRASKA LIQUOR CONTROL COMMISSION

| QUUR L | CENSE INFORM | ATION | | | |
|--------------|--------------|--------------------|---|---|--|
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| Seri | vices, In | C. CL | ASS & LICEN | emun Bei | ER |
| A | irport | In | n | 71 | PCODE |
| in co | DADASST. | GACE | ster | | 2852/ |
| | Bru | u Ro | alman | | |
| NFORM | ATION (MUST | BE 21 O | R OVER) | | |
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| 1 | CITY | COLDER | _ | THE RESERVE | - |
|) r. | LINCOLN | 1 | | NE | ZIP CODS |
| (402) | 475-954 | BER | DRIVER | | NUMBER & STAT |
| ATION | UF NOT MAR | RIED IND | CATE N | ONE | - |
| | 7 | | | | LICENSE NUMBER |
| | PT ACE OF | DIUMA | | | |
| | DR. BUSINESS | ATION (IF NOT MAR) | Services, Inc. FORMATION (MUST BE 21 OF SEX SOCIAL SECURITY NUMBER OF MUSINESS TELEPHONE NUMBER (42) 477-954 ATION (UF NOT MARRIED IND) | Services, Inc. FOR DOTT DON'TY LINCOLD LANCESTER BE CUIPOTALE MEMBER. CEO: Brace Rahman NFORMATION (MUST BE 21 OR OVER) SEX SOCIAL SECURITY NUMBER DATE OF SEX F (M) CITY COUNTY LINCOLW LANCASTEN BUSINESS TELEPHONE NUMBER (402) 477-954 ATION (LE NOT MARRIED INDICATE NO BOCIAL SECURITY NUMBER | Services, Inc. ATTOMICE COUNTY COUNTY LANCASTER CEO: Bruce Cahmani NFORMATION (MUST BE 21 OR OVER) SEX SOCIAL SECURITY NUMBER DATE OF BIRTH P. M. SOCIAL SECURITY NUMBER COUNTY STATE DRIVERS TELEPHONE NUMBER CHOZ. 477 - 954 ATION (IF NOT MARRIED INDICATE NONE) SOCIAL SECURITY NUMBER DRIVERS ASTATE |

1. READ CAREFULLY - Answer completely and accurately

Has anyone who is a purty to this application or their spouse, ever been convicted of or plead guilry to any criminal charge? Criminal charge mauns any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

2. Have you or your apound ever made application for any liquor license or manager for any liquor license? IF YES, for what premise

IINO ARNUld'S TAVERN.

Printed Je aire Istal: 1



| 3. Have you or your spo | use ever made a compromi | ise settlement for | violation o | of such laws? | 911 | OL. | |
|--|--|---|---------------------------------|---|------------------|---|----------------------|
| YES X NO | | | | | | ny 20 20 | 102 |
| 4. Do you, as a manager Nebraska Liquor Control YES INO | r, have all the qualifications Act (§53-131.01) | s required by any | person ent | itled to hold a Nebras | ka Liquor L | | OLIOR |
| YES NO | print cards and PROPER | FEES (if check, | made out to | the NE State Patrol), | , with this ap | oplication? | |
| LIST PRIN | CIPAL RESIDENCE FO | R PAST 10 YEA | RS, APPL | JICANT AND SPOU | SE MUST | COMPLETE | |
| 620W. BROAD | | YEAR FROM 3 Pro | SPOUSI | G: CITY & STATE | -v (a) 31 | - | EAR TO |
| LINCOLW, N | | | | | 0 | | |
| | | | | | | | |
| | EMPLO | YERS – LIST I | AST TWO | EMPLOYERS | | | |
| YEAR FROM TO | NAME OF EMPLOYER | | | NAME OF SUPERVISO | R | TELEPHONE N | UMBER |
| SepT-01 SepT-02 | Gil GRAD | y | | GIL GN | Ady | 475-8 | 888 |
| Aug-01 Sept-01 | John Bond | OGNA | | John Bon | Lugna | 483-7 | 444 |
| STATE OF NEBRASKA | .) SS | | | | | ari a bi oo | :: |
| oppression, that said application | irst duly sworn upon oath, depose it has been read and that the con II be deemed guilty of perjury and | tents thereof and all | statements co | intained therein are true If | any false state | ement is made in | e and foregoin |
| The undersigned applicant here State and Federal), and bank o he Nebraska Liquor Control C | by consents to an investigation or r lending institution records, and commission and any other individ- a affidavit may be attached how | f his/her background said applicant and sp lual disclosing or rel | including all souse waive ar | records of every kind and only rights or causes of action formation to the Nebraska | description incl | luding police reco | ny have again |
| | nd acknowledge that any license | | | | on, is subject t | to cancellation if | the information |
| heov. & | cheren Tr | - | | Slower | 60 46 | | |
| | 20 | | | | f Spouse (if ap | *************************************** | |
| lay of Color | sworn to before me this 2.8 | _ | | ed in my presence and swo | | this | |
| A GE | NERAL NOTARY-State of Nebraska BRENDA D. BLACK My Comm. Exp. June 5, 2004 | 1 | | Notary | Signature & | Scal | FORM 15-III REV M |

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

- INSTRUCTIONS:

 1) Application and application for manager must be typewritten and submitted in triplicate
 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 2 of the stock, b) chief executive officer, c) proposed manager and d) all spouses 3) Information regarding spouses must be completed

| | 25% |
|---|--------------------------------------|
| R | ECEIVED |
| | NOV 20 2002 |
| O | NEBRASKA LIQUOR ONTROL COMMISSION |
| | |

| 80246 (303) 880-290/ | Home Telephone Number | Zip Code 80246 | State | Glendale |
|----------------------------|---|--|----------------|--|
| State Colorado | S | 0,0 | 0 | Home Address (1) 4561 E. Kentucky Circle |
| Social Security Number | Date of Birth | Title President | Title Pr | Name Prace Rahmani-Avar |
| | FICER | HEF EXECUTIVE OF | EOFTHECI | IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER |
| Scherer | | Proposed Manager | Name of I | Name of Registered Agent Cholamre Son Kahmani - Azar Name of Proposed Manager LCO |
| Zip Code 80204 | AR | State C o | les | Den ver |
| (303) 429-6332 | | | Sa Espe | enver, co 80204 |
| Corporate Telephone Number | | Mailing address for receipt of Liquor Control Commission Mailings | Mailing addres | Corporate Street Address (1) 620 Federal BIVd. |
| 0 | 100,000 | | Anc | Colorado Hospitality Services, Inc. |
| es (if corporation) | Total Number of Shares (if corporation) | | ration | Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation |

Corporation/LLC Application for License - Form 3

| | | (If Necessary, Continue on Senarate Sheet) |
|---------------|--|---|
| | | Spouse Name |
| | | NAME |
| | | Spouse Name |
| | | NAME |
| = 8 | | Spouse Name |
| | | NAME |
| | | Spouse Name |
| | | NAME |
| | | Spouse Name |
| | | NAME |
| · | | Spouse Name N/A |
| | | Bruce Rahmani |
| Date of Birth | Social Security Number Date | Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases |
| S S | FRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPO | FRINCIPUE OFFICENCY MINECIPE |

Corporation/LLC Application for License - Form 3

| asl | |
|---------|---|
| Liquor | 1 |
| Control | |
| SSIO | |
| ň | |

| | In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format |
|---|---|
| SECRETARY/MEMBER | |
| BYLA Bauc Jahman. Chlanza Rahman: 1300 | Notary Dublic Signature & Seal |
| OF COLOR POINT | Denver County) ss. |
| NOTARL SCHILL | Starting Date: 1/1/0 2 Ending Date: 19/31/0 2 |
| stock/interest in that corporation/LLC. Any applicant who has a corporation orporations owning more than 25% stock and listing of the percentage of stock | If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned |
| RECE NOV | |
| EIVED 20 2002 ASKA LIQUOR DL COMMISSION | Is this Corporation/LLC controlled by another Corporation? ☐ YES X NO Name of Control Corporation |

FORM 35-4183 Page 3 REV 02/01